introduction, as shown in Fig. 8. That is, a blunt cannula BC may be able to pass inwardly through the established tissue tract ETT, as shown in Fig. 9A. Usually, the blunt cannula will have a diameter which is larger than that of the tissue tract which will have collapsed after the needle was removed in the previously described treatment protocol. Thus, as the blunt cannula is introduced through the established tissue tract, the tissue tract will be dilated.--

IN THE CLAIMS:

Please amend claims 1, 2, 14, 17, 20, 21, 25, and 26, cancel claims 9 and 15, and add new claim 27, as follows:

1. (Amended) An implantable port comprising:

a port body having a flow passage therethrough, said flow passage having an upstream end and a downstream end, wherein at least a portion of the upstream end is adapted to sealingly engage an access tube which is inserted into said upstream end; and

a pressure-responsive valve element positioned in the flow passage within the port body downstream from the upstream portion so that an access tube can be fully inserted into said upstream portion without engaging the valve component, wherein the valve component is closed in the absence of a differential pressure above a threshold level.

2. (Amended) An implantable port as in claim 1, wherein said port body comprises a housing and a housing insert coupled to said housing.

Please cancel claim 9.

14. (Amended) An implantable port as in claim 1 wherein the flow passage further comprises a catheter coupled to said port body wherein said catheter has a lumen fluidly coupled to said passage in the port body.

Please cancel claim 15.

17. (Amended) A method for delivering a substance to a subcutaneous target site, said method comprising:

percutaneously introducing an access tube to an implanted port having a flow passageway with an upstream end, a downstream end, and a valve element in the flow passageway within the port, wherein the access tube is introduced to seat in the passage but does not engage the valve element; and

introducing said substance into the flow passage through the access tube at a pressure sufficient to open the valve element to permit flow through the flow passageway to the target site.

20. (Amended) A method as in claim 17 further comprising locating the port by manually feeling the port to determine the position of the aperture.

21. (Amended) A method as in claim 17, wherein percutaneously introducing further comprises introducing the access tube through a skin layer overlying the implanted port having a thickness in the range from 3 mm to 20 mm.

25. (Amended) A kit as in claim 24, further comprising a penetrating element.

26. (Amended) A kit as in claim 25, wherein the penetrating element comprises a syringe needle.

27. (New) An implantable port as in claim 2, wherein the pressure-responsive valve element is integrally formed in the housing insert.

IN THE DRAWINGS:

Please add Fig. 9A.

Please add reference numeral --86-- to Fig. 5B as shown in red ink on an enclosed copy of the submitted drawing.